Organization ID # 0529285 State of origin

Commonwealth of Kentucky Filing fee \$115.00 Alison Lundergan Grimes, Secretary of Sta

0529285.09

dcornish **PRPF**

Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 10/17/2014 1:29 PM Fee Receipt: \$115.00

RST

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and Reinstatement Annual Report For the year 2014

Exact organization name and principal office address HEAVENLY HOMES, INC. 313 PELICAN LANE **LEXINGTON KY 40511**

Registered Agent and Registered Office Address

PAUL E SEXTON 313 PELICAN LANE **LEXINGTON, KY 40511**



The principal office address and registered agent

name/office address cannot be changed on this form. When reinstating, you cannot modify the

addresses until the reinstatement is filed. Once the

filed online at app.sos.ky.gov/ftsearch or can be

downloaded from our website.

reinstatement is filed, the statement of change can be

Principal Officers specified, officer addresses	s - List the name, address and title of a default to the principal office address.	all current officers. All organizations must list at least one (1) officer, evo Corporations are required to list a Secretary or other officer serving as i	en in the case of a sole officer. If not records custodian
Sole Officer	PAUL E SEXTON		
	name and address of all directors (if app	licable).No listing of directors is verification that the corporation has dis	pensed with directors. If not specified,
PAUL E SEXTON			
	-		
2014. The undersign	ned states that the grounds fo	n September 30, 2014 because the entity did not file r dissolution either did not exist or have been elimina inclosed is a check in the amount of \$115.00, payabl	ted, and the entity's name
		authorizes the Kentucky Department of Revenue to C. to the Secretary of State, as required for reinstater	
If not an officer of s	aid entity, please provide a De	claration of Power of Attorney with the Reinstatemen	t Application.
X4al	5	FRESIDENT	10/15/14
Signature of office	r or chairman of the board (Required)	Title (Required)	/Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

October 17, 2014

HEAVENLY HOMES, INC. 313 PELICAN LANE LEXINGTON KY 40511

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **HEAVENLY HOMES, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Darrell REVX023, Revenue Auditor II Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2127 FAX# 502-564-3392

Kentucky Secretary of State organization number 0529285





EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov

Thomas O. Zawacki Secretary

Buddy Hoskinson Executive Director

HEAVENLY HOMES, INC.

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Peter Travis Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0529285

